

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

ADDRESS (number and street)

8312 Old Georgetown Road

Check if different than previously reported. (ACC)

Bethesda

MD

20814

1858

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00008639

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

X

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2004

through

05

31

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dr. Gerald Peterson, DPM

Signature of Treasurer

Electronically Filed by Dr. Gerald Peterson, DPM

Date

06

16

2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Report Covering the Period: From: ^M05 ^Y01 ^Y2004 To: ^M05 ^Y31 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		396695.75
(b) Cash on Hand at Beginning of Reporting Period	416600.45	
(c) Total Receipts (from Line 19)	15282.99	159812.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	431883.44	556507.84
<hr/>		
7. Total Disbursements (from Line 31)	44000.00	168624.40
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	387883.44	387883.44
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Report Covering the Period: From: ^M05 ^D01 ^Y2004 To: ^M05 ^D31 ^Y2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6641.00	
(ii) Unitemized	6475.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	13116.00	146258.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13116.00	146258.02
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1166.99	12554.07
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15282.99	159812.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15282.99	159812.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	124.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	124.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44000.00	168500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	44000.00	168624.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	44000.00	168624.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	13116.00	146258.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13116.00	146258.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	124.40
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	124.40

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Wayne D. Marchand		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 434 South St.		Transaction ID: 9673508
City Auburn	State MA	Zip Code 01501-2733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Harvey D. Lederman		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 12 Biltmore Park		Transaction ID: 9673421
City Bloomfield	State CT	Zip Code 06002-2141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer W. Hartford Podiatry Associates	Occupation Podiatrist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Brian G. Holcomb		Date of Receipt M / D / Y 05 / 04 / 2004
Mailing Address 3454 Green Apple Rd.		Transaction ID: 9604119
City Gainesville	State GA	Zip Code 30508-4121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cumming Foot & Leg Clinic	Occupation Podiatrist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Mark L. Riley		Date of Receipt M / D / Y 05 / 06 / 2004
Mailing Address 24033 Wildbrook Ct.		Transaction ID: 9643716
City Southfield	State MI	Zip Code 48034-1336
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 540.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 540.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Nicholas C. Crimali		Date of Receipt M / D / Y 05 / 07 / 2004
Mailing Address 860B S.V.L. Box		Transaction ID: 9673879
City Victorville	State CA	Zip Code 92382
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Kirk W. Davis		Date of Receipt M / D / Y 05 / 10 / 2004
Mailing Address 44 Monroe Dr.		Transaction ID: 9674454
City Chambersburg	State PA	Zip Code 17201-7514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1290.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Raymond G. Cavaliere		Date of Receipt M / D / Y 05 / 10 / 2004
Mailing Address 28 Cedar Ridge Ln.		Transaction ID: 9674440
City	State	Zip Code
Dix Hills	NY	11746-7841
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 251.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 251.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Michael Tritto		Date of Receipt M / D / Y 05 / 10 / 2004
Mailing Address 14409 White Tree Pl.		Transaction ID: 9674453
City	State	Zip Code
North Potomac	MD	20878-4354
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Michael Tritto, DPM, P.A.	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. William H. Mason		Date of Receipt M / D / Y 05 / 10 / 2004
Mailing Address 1903 Fountainview Cir.		Transaction ID: 9694181
City	State	Zip Code
Santa Rosa	CA	95403-5709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	751.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 25
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. William Dale Hall		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 11922 Burning Oaks Rd.		Transaction ID: 9685998
City Oklahoma City	State OK	Zip Code 73150-2811
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer American Foot Clinic	Occupation Podiatrist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. John P. Calcebers		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 2012 8th Ct. S.		Transaction ID: 9694175
City Birmingham	State AL	Zip Code 35205-2739
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Birmingham Podiatry, P.C.	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Richard A. Bronfman		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address 1417 W. 8th St.		Transaction ID: 9694259
City Little Rock	State AR	Zip Code 72201-2529
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer AR Foot Clinic	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Henry N. Merritt, Jr.		Date of Receipt M / D / Y Y Y Y 05 / 17 / 2004
Mailing Address 2850 N.E. 80th St.		Transaction ID: 9694261
City Fort Lauderdale	State FL	Zip Code 33308-2736
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lauderdale Foot Care Center	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Anthony M. Lombardo		Date of Receipt M / D / Y Y Y Y 05 / 17 / 2004
Mailing Address 17104 Westridge Meadow Dr.		Transaction ID: 9712034
City Chesterfield	State MO	Zip Code 63005-1337
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Bridgeton Podiatry	Occupation Podiatrist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Daniel Duane Price		Date of Receipt M / D / Y Y Y Y 05 / 19 / 2004
Mailing Address 3011 N.E. West Devils Lake Rd.		Transaction ID: 9700084
City Lincoln City	State OR	Zip Code 97367-5131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lincoln County Foot Health Center	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Chester A. Neve, Jr.		Date of Receipt M / D / Y 05 / 21 / 2004
Mailing Address 113D Gilliland Rd.		Transaction ID: 9711828
City Louisville	State KY	Zip Code 40245-4034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Timothy C. Ford		Date of Receipt M / D / Y 05 / 24 / 2004
Mailing Address 400D Hope Ct.		Transaction ID: 9711795
City Louisville	State KY	Zip Code 40220-2231
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Paul E. Tipton		Date of Receipt M / D / Y 05 / 24 / 2004
Mailing Address 159 Westwind Rd.		Transaction ID: 9711795
City Louisville	State KY	Zip Code 40207-1545
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Podiatrist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr. Derek John McCannan		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2004
Mailing Address 4804 S.E. 15th St.		Transaction ID: 9711818
City Gresham	State OR	Zip Code 97080-6120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Podiatrist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Gerard J. Busch		Date of Receipt M / D / Y Y Y Y 05 / 28 / 2004
Mailing Address 325 E. Broadway		Transaction ID: 9712025
City Osseo	State MN	Zip Code 55369-1527
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Southdale Foot Clinic	Occupation Podiatrist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	6641.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Monisey For Congress		Date of Receipt M / D / Y 05 / 31 / 2004
Mailing Address 231 North Avenue West #12B		Transaction ID: 9772065
City Westfield	State NJ	Zip Code 07090
FEC ID number of contributing federal political committee. C C00351882		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Check returned to us
Receipt For: 2000 Primary General X Other (specify) ▼ Debt Retirement - 20	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Investment Account, Interest/Dividends		Date of Receipt
Mailing Address 100 Light St., 19th Floor P.O. Box 1476		05 / 12 / 2004
City	State	Zip Code
Baltimore	MD	21202-1036
FEC ID number of contributing federal political committee.		Transaction ID: 9682078
C		Amount of Each Receipt this Period
		1166.99
Name of Employer Lagj Mason Wood Walker, Inc.	Occupation Investment Firm	Interest Income
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5533.88	

SUBTOTAL of Receipts This Page (optional)	▶	1166.99
TOTAL This Period (last page this line number only)	▶	1166.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 25

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Nussle for Congress Committee		Transaction ID: 9643095 Date of Disbursement 05 / 05 / 2004	
Mailing Address PO Box 324		Amount of Each Disbursement this Period 1000.00	
City Manchester State IA Zip Code 52057	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Jim Nussle	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District 2		
Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio			

Full Name (Last, First, Middle Initial) B. Diana Degette For Congress		Transaction ID: 9643094 Date of Disbursement 05 / 05 / 2004	
Mailing Address 770 Grant Street Suite 238 770 Grant Street Suite 238		Amount of Each Disbursement this Period 2500.00	
City Denver State CO Zip Code 80203	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Rep. Diana DeGette	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District 1		
Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General			

Full Name (Last, First, Middle Initial) C. Becerra for Congress		Transaction ID: 9643085 Date of Disbursement 05 / 05 / 2004	
Mailing Address P.O. Box 261060		Amount of Each Disbursement this Period 1000.00	
City Los Angeles State CA Zip Code 90026	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Mr. Xavier Becerra	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District 30		
Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General			

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends Of Carolyn McCarthy		Transaction ID: 9643093 Date of Disbursement 05 / 05 / 2004	
Mailing Address 151 Linden Road		Amount of Each Disbursement this Period 1000.00	
City Mineola State NY Zip Code 11501	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Rep. Carolyn McCarthy	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District 4			

Full Name (Last, First, Middle Initial) B. Upton For All Of Us		Transaction ID: 9643091 Date of Disbursement 05 / 05 / 2004	
Mailing Address P.O. Box 480		Amount of Each Disbursement this Period 500.00	
City St. Joseph State MI Zip Code 49085	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Rep. Fred Upton	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District 6			

Full Name (Last, First, Middle Initial) C. Upton For All Of Us		Transaction ID: 9643096 Date of Disbursement 05 / 05 / 2004	
Mailing Address P.O. Box 480		Amount of Each Disbursement this Period 500.00	
City St. Joseph State MI Zip Code 49085	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Rep. Fred Upton	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District 6			

SUBTOTAL of Disbursements This Page (optional) ► **2000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Diane E Watson For Congress		Transaction ID: 9643084 Date of Disbursement 05 / 05 / 2004	
Mailing Address 601 S Glenoaks Bl #211		Amount of Each Disbursement this Period 2500.00	
City Burbank State CA Zip Code 91502	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Rep. Diane E. Watson	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33			

Full Name (Last, First, Middle Initial) B. Heather Wilson For Congress		Transaction ID: 9643086 Date of Disbursement 05 / 05 / 2004	
Mailing Address P.O. Box 14070 P.O. Box 14070		Amount of Each Disbursement this Period 1000.00	
City Albuquerque State NM Zip Code 87101	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Rep. Heather A. Wilson	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 1			

Full Name (Last, First, Middle Initial) C. Geoff Davis For Congress		Transaction ID: 9643092 Date of Disbursement 05 / 05 / 2004	
Mailing Address 3181 Dixie Highway Suite F		Amount of Each Disbursement this Period 1000.00	
City Erlanger State KY Zip Code 41018	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Mr. Geoffrey Davis	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 4			

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Enzi For Us Senate		Transaction ID: 9643089 Date of Disbursement 05 / 05 / 2004	
Mailing Address PO Box 2775		Amount of Each Disbursement this Period 2000.00	
City Cody	State WY	Zip Code 82414	011 Category/ Type 2008 Primary Election
Purpose of Disbursement 2008 Primary Election			
Candidate Name Sen. Michael B. Enzi			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2008 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 Primary Electio		
State: WY District 2			

Full Name (Last, First, Middle Initial) B. Friends Of Mike Ferguson		Transaction ID: 9643085 Date of Disbursement 05 / 05 / 2004	
Mailing Address C/O Ron Gravino P.O. Box 225		Amount of Each Disbursement this Period 1000.00	
City Colonia	State NJ	Zip Code 07067	011 Category/ Type 2004 Primary Election
Purpose of Disbursement 2004 Primary Election			
Candidate Name Rep. Mike Ferguson			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
State: NJ District 7			

Full Name (Last, First, Middle Initial) C. A Lot Of People Who Support Jeff Bingaman		Transaction ID: 9693003 Date of Disbursement 05 / 17 / 2004	
Mailing Address PO Box 16210		Amount of Each Disbursement this Period 2500.00	
City Albuquerque	State NM	Zip Code 87191	011 Category/ Type 2006 Primary Election
Purpose of Disbursement 2006 Primary Election			
Candidate Name Sen. Jeff Bingaman			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary Electio		
State: NM District 2			

SUBTOTAL of Disbursements This Page (optional) ► **5500.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial)
A. Earl Pomeroy For Congress

Mailing Address PO Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
2004 Primary Election

Candidate Name
Rep. Earl Pomeroy

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

State: ND District: 1

Transaction ID: 9693004
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type
2004 Primary Election

Full Name (Last, First, Middle Initial)
B. John D. Dingell For Congress Committee

Mailing Address 607 14th Street N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
2004 Primary Election

Candidate Name
Rep. John D. Dingell

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

State: MI District: 15

Transaction ID: 9692999
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
2000.00

011
Category/
Type
2004 Primary Election

Full Name (Last, First, Middle Initial)
C. Texans For Henry Bonilla

Mailing Address P.O. Box 17292

City San Antonio State TX Zip Code 78217

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Henry Bonilla

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

State: TX District: 23

Transaction ID: 9693002
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type
2004 General Election

SUBTOTAL of Disbursements This Page (optional) ► **4000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial)
A. Issa For Congress

Mailing Address P O Box 760

City Vista State CA Zip Code 92085

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Darrell E. Issa

Office Sought: House Senate President
State: CA District: 49

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

Transaction ID: 9693006
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
2500.00

011
Category/
Type
2004 General Election

Full Name (Last, First, Middle Initial)
B. Christopher Shays For Congress Committee

Mailing Address 98 East Avenue Rear Building
98 East Avenue Rear Building

City Norwalk State CT Zip Code 06851

Purpose of Disbursement
2004 Primary Election

Candidate Name
Rep. Christopher Shays

Office Sought: House Senate President
State: CT District: 4

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

Transaction ID: 9693005
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type
2004 Primary Election

Full Name (Last, First, Middle Initial)
C. Oxley For Congress

Mailing Address P.O. Box 2002

City Findlay State OH Zip Code 45839

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Michael G. Oxley

Office Sought: House Senate President
State: OH District: 4

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

Transaction ID: 9693007
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
2000.00

011
Category/
Type
2004 General Election

SUBTOTAL of Disbursements This Page (optional) ► **5500.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial)
A. Putnam For Congress

Mailing Address Post Office Box 2257

City Bartow State FL Zip Code 33831

Purpose of Disbursement

Candidate Name
Rep. Adam H. Putnam

Office Sought: House Senate President
State: FL District 12

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

Transaction ID: 9693000
Date of Disbursement
05 / 17 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. Johnson For Congress Committee

Mailing Address P.O. Box 1086

City New Britain State CT Zip Code 06050

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Nancy L. Johnson

Office Sought: House Senate President
State: CT District 5

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

Transaction ID: 9718054
Date of Disbursement
05 / 26 / 2004

Amount of Each Disbursement this Period
2000.00

011
Category/
Type

2004 General Election

Full Name (Last, First, Middle Initial)
C. Darlene Hooley For Congress

Mailing Address 6404 Failing St

City West Linn State OR Zip Code 97068

Purpose of Disbursement
2004 General Election

Candidate Name
Darlene Hooley

Office Sought: House Senate President
State: OR District 5

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

Transaction ID: 9717919
Date of Disbursement
05 / 26 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

2004 General Election

SUBTOTAL of Disbursements This Page (optional) ▶ **4000.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Ben Cardin For Congress		Transaction ID: 9718174 Date of Disbursement 05 / 26 / 2004	
Mailing Address 100 E. Pratt Street 26th Floor		Amount of Each Disbursement this Period 2000.00	
City Baltimore State MD Zip Code 21202	Purpose of Disbursement 2004 General Election	011 Category/ Type	2004 General Election
Candidate Name Rep. Benjamin L. Cardin	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District 3			

Full Name (Last, First, Middle Initial) B. Rangel for Congress		Transaction ID: 9718173 Date of Disbursement 05 / 26 / 2004	
Mailing Address 850 7th Avenue, #701		Amount of Each Disbursement this Period 2000.00	
City New York State NY Zip Code 10010	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Mr. Charles B. Rangel	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District 15			

Full Name (Last, First, Middle Initial) C. Levin For Congress		Transaction ID: 9717918 Date of Disbursement 05 / 26 / 2004	
Mailing Address P.O. Box 37		Amount of Each Disbursement this Period 1000.00	
City Roseville State MI Zip Code 48068	Purpose of Disbursement 2004 Primary Election	011 Category/ Type	2004 Primary Election
Candidate Name Rep. Sander M. Levin	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District 12			

SUBTOTAL of Disbursements This Page (optional) ► **5000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial) A. Kennedy for Senate		Transaction ID: 9717950 Date of Disbursement 05 / 26 / 2004	
Mailing Address 426 C Street NE - Rear Bldg		Amount of Each Disbursement this Period 2000.00	
City Washington, State DC Zip Code 20002	011 Category/ Type	2008 Primary Election	
Purpose of Disbursement 2008 Primary Election			
Candidate Name Edward M. Kennedy			
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: MA District 1	Disbursement For: 2008 Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) ▼ 2008 Primary Electio		

Full Name (Last, First, Middle Initial) B. Jim Davis for Congress		Transaction ID: 9718171 Date of Disbursement 05 / 26 / 2004	
Mailing Address 3716 W Swann Avenue		Amount of Each Disbursement this Period 1000.00	
City Tampa, State FL Zip Code 33608	011 Category/ Type	2004 Primary Election	
Purpose of Disbursement 2004 Primary Election			
Candidate Name Mr. Jim Davis			
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: FL District 11	Disbursement For: 2004 Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		

Full Name (Last, First, Middle Initial) C. Engel For Congress		Transaction ID: 9717916 Date of Disbursement 05 / 26 / 2004	
Mailing Address 482 California Road		Amount of Each Disbursement this Period 1000.00	
City Bronxville, State NY Zip Code 10708	011 Category/ Type	2004 Primary Election	
Purpose of Disbursement 2004 Primary Election			
Candidate Name Rep. Eliot L. Engel			
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NY District 17	Disbursement For: 2004 Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio		

SUBTOTAL of Disbursements This Page (optional) ▶ **4000.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

Full Name (Last, First, Middle Initial)

A. Berkley For Congress

Mailing Address 3069 Conquista Court

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
2004 Primary Election

Candidate Name
Rep. Shelley Berkley

Office Sought: House Senate President
State: NV District: 1

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

011
Category/
Type

Transaction ID: 9718177

Date of Disbursement

05 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

2004 Primary Election

Full Name (Last, First, Middle Initial)

B. Citizens For John Olver For Congress

Mailing Address P.O. Box 819
PO Box 819

City Amherst State MA Zip Code 01004

Purpose of Disbursement
2004 Primary Election

Candidate Name
Rep. John W. Olver

Office Sought: House Senate President
State: MA District: 1

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 Primary Electio

011
Category/
Type

Transaction ID: 9717917

Date of Disbursement

05 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

2004 Primary Election

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Pitts

Mailing Address PO Box 216

City Unionville State PA Zip Code 19375

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Joseph R. Pitts

Office Sought: House Senate President
State: PA District: 16

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

011
Category/
Type

Transaction ID: 9717920

Date of Disbursement

05 / 26 / 2004

Amount of Each Disbursement this Period

1000.00

2004 General Election

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Podiatric Medical Assn., Inc. Podiatry Political Action Committee

<p>Full Name (Last, First, Middle Initial) A. Jo Bonner For Congress Committee</p> <p>Mailing Address P.O. Box 851232</p> <p>City Mobile State AL Zip Code 36685</p> <p>Purpose of Disbursement 2004 Primary Election</p> <p>Candidate Name Rep. Jo Bonner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District 1</p> <p>Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio</p>			<p>Transaction ID: 9718172 Date of Disbursement 05 / 26 / 2004</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type 2004 Primary Election</p>		
<p>Full Name (Last, First, Middle Initial) B. John Lewis For Congress</p> <p>Mailing Address 1520 Pinehurst Drive Sw</p> <p>City Atlanta State GA Zip Code 30311</p> <p>Purpose of Disbursement 2004 Primary Election</p> <p>Candidate Name Rep. John Lewis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District 5</p> <p>Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 Primary Electio</p>			<p>Transaction ID: 9718723 Date of Disbursement 05 / 26 / 2004</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type 2004 Primary Election</p>		

SUBTOTAL of Disbursements This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	44000.00